AT LEAST HALF OF THE YOUNGEST CHILDREN diagnosed with ADHD aren’t getting the recommended behavior therapy treatment. The US Centers for Disease Control and Prevention urges their healthcare providers to step up the conversation with their parents about behavior therapy.

According to the CDC’s May 2016 Vital Signs report, of the six million children diagnosed with ADHD in the United States, two million were diagnosed before the age of six. Studies show that children diagnosed at a young age tend to have the most severe symptoms. Since 2011, the American Academy of Pediatrics has recommended that healthcare providers refer parents of children with ADHD between two and five years of age to training in behavior therapy before they prescribe medication.

CDC researchers looked at healthcare claims data for at least five million young children insured by Medicaid from 2008 to 2011 and an additional one million young children insured through employer-sponsored insurance from 2008 to 2014. They found that only one in two young children being treated for ADHD received any form of psychological services, which might have included parent training in behavior therapy. This was contrasted with the three in four young children who received medication for their ADHD symptoms. And the percentage of children with ADHD receiving psychological services has not increased over time, according to the report.
BEFORE MEDICATION

Young Children

BY KAREN Sampson Hoffman, MA

June 2016
Behavior treatment

“There is clear evidence based on a plethora of controlled studies that behavioral parent training should be the first choice for treating ADHD in young children,” says George DuPaul, PhD, a professor of school psychology at Lehigh University and a former member of CHADD’s professional advisory board. “One thing we are finding is that for a lot of kids with ADHD, the families don’t need a hugely intense intervention to help. If they’re given some information about the disorder and good behavior management principles and given some initial support in using them, it can make a big difference, even over a short time period.”

Behavior treatment, which includes parent training by a licensed behavior therapist, has been found to be as effective as medication for this age group, according to Anne Schuchat, MD, (RADM, USPHS), principal deputy director of the CDC. In this approach, a behavior therapist teaches parents how to provide positive attention and set rules. Parents then go home and practice those new techniques before returning to talk about what works for their child and family and what didn’t.

“We know that medicine will be appropriate for some young children, but we encourage pediatricians, therapists, and other healthcare providers to work with families to make sure children with ADHD are receiving the most appropriate treatment, and this should include a discussion about behavior therapy as the first step,” Schuchat says. “It has been shown to be as effective as medicine, but without the risk of side effects.”

“We are still learning about the potential of unintended effects of long-term use of ADHD medicine on young children,” she says. “Until we know more, the recommendation is to first refer parents of children under six years of age with ADHD for training in behavior therapy before prescribing medicine.”
HOW TO FIND A BEHAVIOR THERAPIST NEAR YOU

Behavior therapy is the first step when you have a young child diagnosed with ADHD. Finding a behavior treatment program for your child can be a challenge for you and your child’s healthcare provider. The CDC provides a webpage with links to help parents and providers find behavior therapists:

http://www.cdc.gov/ncbddd/adhd/behavior-therapy.html

You can also find resources to help you on the CHADD website:

● CHADD Professional Directory
  http://www.chadd.org/professionaldirectory

● Professionals Who Diagnose and Treat ADHD
  http://www.chadd.org/professionals

● Hospital and University Centers for ADHD
  http://www.chadd.org/hospitals

Additional local resources can be found through hospital and university children’s health programs, state and county health departments, or independent clinics that address children’s mental health. Some therapists will have training or certification in a program that has been proven to work in young children with ADHD. Programs that have been shown to be effective include:

● Parent-Child Interaction Therapy (PCIT)
  http://www.pcit.org

● Incredible Years Parent Program
  http://incredibleyears.com

● Triple P – Positive Parenting Program
  http://www.triplep.net/glo-en/home

● New Forest Parenting Programme (Europe)

Questions to ask before you begin to work with a program include:

● Does this program teach parents skills and strategies that use positive reinforcement, structure, and consistent discipline to manage their child’s behavior?

● Does this program teach parents positive ways to interact and communicate with their child?

● Will we meet regularly with the program facilitator to monitor progress and provide coaching and support?

● Does the facilitator work with me to re-evaluate and remain flexible enough to adjust strategies as needed?

Your child’s healthcare provider can be a good source of information on local programs and resources. It’s important to continue the conversation on your child’s progress during regular healthcare visits. For more information on behavior therapy, visit CHADD’s webpage on Parent Education and Training, http://www.chadd.org/parented.

“The bottom line is we know parents want to do what is best for their children,” says Schuchat. “Behavior therapy has been shown to help improve the symptoms of ADHD in young children.”

A call to action for healthcare providers

The Vital Signs report urges health professionals who treat young children with ADHD to support parents by explaining the benefits of behavior therapy and referring them for training in behavior therapy. This follows the guidelines for diagnosing and treating ADHD in young children from the American Academy of Pediatrics and the American Academy of Child and Adolescent Psychiatry (see sidebar, page 10).

Healthcare providers, or staff members from their practices, should look in their communities for evidence-based behavior therapy and parent training programs to suggest in their referrals. Since it can be difficult to find therapists who train parents in behavior therapy in some areas of the country, the CDC provides resources on its website (see sidebar, page 9).

“It’s encouraging to see the CDC not only emphasize the importance of behavioral parent training as a primary treatment for young children with ADHD, but also to underscore the need for greater availability of trained therapists to provide this critical service,” says DuPaul. “Hopefully the mental health community can be responsive to this important call to action.”

The message from this Vital Signs report is important for parents and healthcare providers who may need to learn more about behavioral treatment options for young children, says DuPaul.

“[The] treatment of first choice for many people is to go to medication,” he says. “The problem is that there appears to be a higher side-effect profile with the younger kids, particularly in terms of growth inhibition that led a significant percentage—even though the medication was helping the kids, they didn’t ultimately keep them on the medication because of the growth effects. The other big hurdle for behavioral interventions is, quite frankly, that they’re [difficult] for parents and teachers. It involves work, effort, and consistency. These are all things we struggle with as human beings, particularly if the parents have ADHD themselves. It’s challenging to be able implement these strategies with any particular consistency.”
What is behavior therapy?
Behavior therapy can improve a young child’s behavior, self-control, and self-esteem and is most effective when provided by their parents. When parents become trained in behavior therapy, they learn skills and strategies to help their child with ADHD succeed at school, at home, and in relationships.

“This kind of therapy has two parts,” explains Georgina Peacock, MD, MPH, FAAP, director of the Division of Human Development and Disability at CDC’s National Center on Birth Defects and Developmental Disabilities. “It strengthens the relationship between the parent and child, and it gives parents more effective tools for helping their child learn positive behaviors. How does behavior therapy work? Behavior therapy is like having your own personal coach for dealing with challenging behaviors. A behavior therapist teaches parents how to provide positive attention, and set and communicate rules.”

Behavior therapy for young children involves licensed therapists training parents in skills to guide their child’s behavior, such as:

- **Positive communication:** When parents give children their full attention and reflect their words back to them, they know the parents are listening and care about what they have to say.

- **Positive reinforcement:** Praise the child when she does something right. The more parents praise a behavior, the more likely it is the child will behave the same way again.

- **Structure and discipline:** Children do better when their world is predictable. Set up routines and daily schedules to help the child know what to expect each day. Respond to the child’s behavior the same way every time to help her learn more quickly.

Sometimes a therapist works directly with a parent and child or the therapist will meet with a group of parents. Parents will go home and practice techniques, and then go back to the therapist to talk about what worked and what didn’t, and learn new skills to practice again.

“Typically, parents meet with a therapist for eight or more sessions,” says Peacock. “Parents who use the strategies report their children learn to better control their own behavior, which helps the child at school, at home, and in the child’s relationships with other people. It takes work, time, and effort, but the benefits can be lifelong.”

Once a family begins working with a behavior therapist, healthcare providers should follow up with the family periodically to make sure the treatments are working and determine if adjustments to the treatment plan need to be made.

For some young children, medication may still be necessary after behavior therapy and parent training have been implemented. Some children do not respond to the behavior treatment or do not respond strongly enough. Adding medication as a support to behavior therapy can be helpful at that point.

The conversation between parents and providers is a critical one when it comes to getting children under age six the proper treatment for ADHD.
“Many families will benefit from behavior therapy. However, in some cases medicine may be appropriate,” Peacock says. “When healthcare providers and families know the benefits and risks of all available treatments, they are best prepared to make the most appropriate treatment choice for young children with ADHD.”

Helping children to thrive
Parents look to their child’s healthcare providers for guidance. The conversation between parents and providers is a critical one when it comes to getting children under age six the proper treatment for ADHD. Parents often have questions about what treatment involves and experience difficulty finding support.

“Parents may feel overwhelmed with decisions about their child’s treatment for ADHD, but healthcare providers, therapists, and families can all work together to help the child thrive,” says Schuchat. “Parents of young children with ADHD may need support, and behavior therapy is an important first step.”

“Behavior therapy may require more time, energy, and resources than medicine,” Schuchat says. “But the effects of behavior therapy can be longer lasting. We know that, unfortunately, behavior therapy may not be available in every community. We know there’s work to be done to increase availability. State and local governments, healthcare professional organizations, and insurers can work together to increase these options for families.”

Additionally, Vital Signs notes that health professional organizations can support their members and other healthcare providers in beginning and continuing this conversation in several ways. They can inform healthcare providers about the reasons for and benefits of parent training in behavior therapy. They can provide training and support to new and existing providers to deliver parent training in behavior therapy to fill service gaps. And they can include content about proven treatments for ADHD in graduate or professional curricula, training, and certification.

“This report suggests we’re missing opportunities for young children with ADHD and their parents to benefit from behavior therapy,” says Schuchat. “We all can play a role in helping parents get the information and services they need.”

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